



VOL VI No. 12

Naval Hospital, Orlando, Florida

1 November 1983

3rd Quarter, 1983

Enlisted and Civilian Awards



HM2 Andrew Hairl, USN

Sailor of the Quarter

HM2 Andrew Hairl is an Advanced Laboratory Technician assigned as the night supervisor of the Main Laboratory. He is currently enrolled, on his off-duty time, at Valencia Community College and is working to complete a bachelor's degree leading to, and meeting requirements for, the American Society of Clinical Pathologists certification.

HM2 Hairl is married and he and his wife, Vanessa, are extremely proud of their three children: Christie, 9 years old, Candid, 4 years old, and Andrea, 1 year old.

Blue Jacket of the Quarter



HN Keith Newton, USN

HN Keith Newton, the 3rd Quarter BJM, is the Senior Corpsman for the Surgical Unit, Inpatient Nursing Department. HN Newton came on board in December 1982.

Civilian of the Quarter



Mary Van

Mary Van is assigned to Manpower Management and processes Officer Fitness Reports, Enlisted Evaluations and is the Managing Editor of Vital Signs.

6 October presentations

CAPT Herr and CAPT McClurkan with the recipients of awards presented on 6 October. Left to right: HM2 Michael Hodgson, First Award, Good Conduct Medal; HMCS David F. Clark, 6th Award, Good Conduct Medal; HM1 John A. Reed, 3rd Award, Good Conduct Medal, HM2 Cynthia Morey, First Award, Good Conduct Medal, and HMCM William A. Wood, Navy Achievement Medal. U.S. Navy Photo

American Red Cross

Volunteer Hours
for September -
1853

Vital Signs' StaffEditor:

HMCM(SS) R. C. Clements, USN

Managing Editor:

Mary V. Van den Heuvel

Nursing Services Coordinator:

LT Joyce E. Dresher, NC, USN

Steth-o-Scoop Reporter/Photographer:

HM1 Bogan McQuigg, USN

Whoooizzit?

Do you know this staff member? The answer is on Page 12.

VITAL SIGNS is published in compliance with NAVEXOS-P35 (Rev. JAN 74) and printed by the Navy Publication and Printing Service Branch Office, Orlando, from appropriated funds.

Commanding Officer: CAPTAIN A. HERR, DC, USN
Editor: HMCM(SS) R. C. CLEMENTS, USN

Contents of this publication does not necessarily reflect the official views of the Department of Defense. All copy submitted for use in VITAL SIGNS must reach the Editor's Office, Room 1800, Building 500, by noon of the 20th of the month.

VITAL SIGNS reserves the right to edit or reject copy to comply with its policy. In reprinting material appearing in VITAL SIGNS, appropriate credit must be given.

STETH - O - SCOOP

**Vital
Signs**

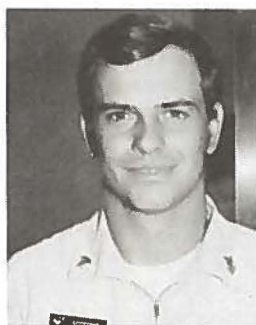
By HM1 Bogan McQuigg, USN



If you were to extend special thanks to someone
on Thanksgiving Day, who would it be?



LTJG Francine Hessler, CEC, USN: "To my parents for their guidance and support to me thru college and now in the Navy."



HM2 Aaron Scoggins, Physical Therapy: "To the troops at Beirut!"



Virginia Harrison, PN, Acute Care Clinic: "My mother and my priest for their guidance and my co-workers for their contributions to the Clinic."



John White, Fiscal and Supply: "Thanks to my wife and children for their love and understandings during the past years."



Marian Modeste, PN, Surgical Clinic: "To my close friends and children for being there when I need them and to God for my health and strength."



John Julian, Fiscal and Supply: "To my wife, Norva, for raising our children and taking care of me for over 30 years!"

Staff Journal

Reenlistments



On 11 October, HM2 Raghavendra K. Parvatikar, Pharmacy Service, was reenlisted by CDR Coy B. Lane, MSC, USN.



On 18 October, LCDR Shirley Peters, NC, Head Operating Room Nursing Department, reenlisted HM2 Edward R. Ronan.

LOA's

20 October



Personnel from Ward 3 rewarded with a LOA from a grateful patient: HA William Furay, HA Tamara Berg, and HA Allen Wilson.

Medals

20 October



LTJG Steven Binnall, MSC, Head, Outpatient Administration Division, received the Joint Service Commendation Medal.



CAPT Richard Manjerovic, MC, Head, Pediatric Department, received the Navy Commendation Medal.



CAPT Herr presented the Navy Achievement Medal to LTJG Scott E. Stegall, CEC, USN.

Departures

On 24 October, CAPT Nickerson presented the Naval Hospital plaque to LCDR Robert J. Russ, NC, USN, on his transfer to Cherry Point, NC.



As HM3 Kevin Fryback, Fiscal and Supply was released from active duty on 18 October, CAPT Herr and ENS Meintzhausen presented him with a LOA.



HM3 Donna Lema, Patient Affairs, receives a handshake and Letter of Commendation from CAPT Herr on her transfer to Yokosuka on 28 October.

More LOA's

CAPT Herr and CAPT McClurkan with another group of outstanding patient care professionals. Next to CAPT McClurkan is HA Theresa Flynn, LCDR Robert Russ, NC, HA Marcelino Resto, and next to CAPT Herr is LCDR Daniel Nader, MC, and CDR F. M. Bumagat, MC.

Training completed

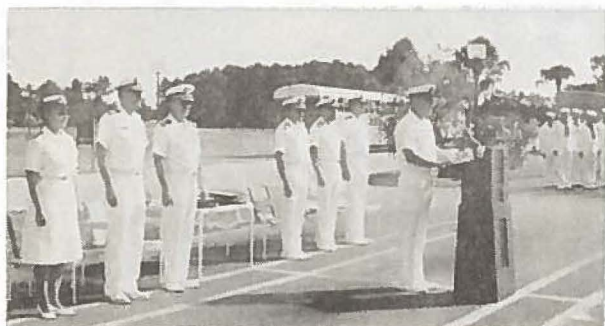
CAPT Herr and CAPT McClurkan with ENS W. Henderson, MSC, and HM2 Cynthia Morey. They received certificates for completing the Industrial Hygiene workshop monitoring at NEHC, Norfolk.



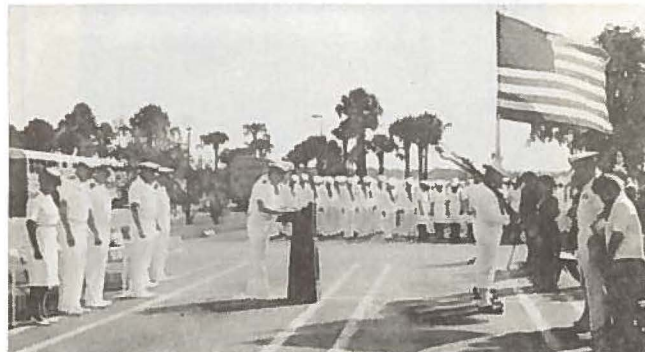
A Letter of Commendation for CDR Susan Eastland, NC, OB-GYN Clinic, on her transfer to Charleston, SC.

28 October - A day to remember

CAPT Fout and CAPT Case retire



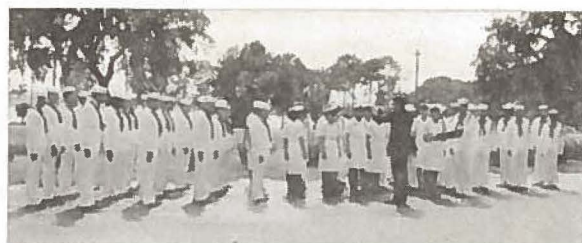
PARADE THE COLORS



INVOCATION



NATIONAL ANTHEM



NAVY HYMN
BLUE JACKET CHOIR



OPENING REMARKS
CAPTAIN A. HERR



PRESENTATIONS TO MRS. FOUT AND MRS. CASE



WIFE'S CERTIFICATE FOR MRS. FOUT



DUTY STATION PLAQUE FOR CAPT FOUT

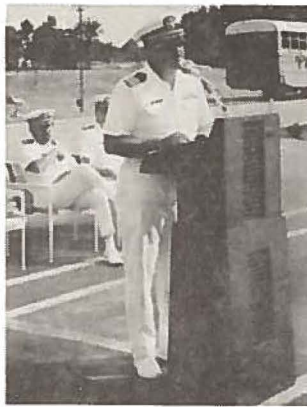
VITAL SIGNS

1 November 1983

Page 7



CAPT FOUT RECEIVES RETIREMENT
CERTIFICATE



REMARKS BY CAPT FOUT



WIFE'S CERTIFICATE FOR MRS. CASE



DUTY STATION PLAQUE FOR CAPT CASE



RETIREMENT CERTIFICATE FOR
CAPT CASE



REMARKS BY CAPT CASE



PRESENTATION OF FLAGS



PIPING CEREMONY



Column Coordinator: ENS S. E. DuLac, MSC, USN



LAB
LINE

CAPT P. E. Petit, MC, USN

How much do you know?

What is your knowledge about alcohol? Do you think you know ALL or at least THE IMPORTANT FACETS of "spirits" and their effect on the human body? Try the following quiz -- you may find that your knowledge about alcohol is more limited than you thought.

- | | TRUE | FALSE |
|--|--------------------------|--------------------------|
| 1. Alcohol is a drug. | ☐ | ☐ |
| 2. In the body, food and alcohol are digested similarly. | ☐ | ☐ |
| 3. In the body, food and alcohol are burned up similarly. | ☐ | ☐ |
| 4. Alcohol is a stimulant and "perks" a person up. | ☐ | ☐ |
| 5. Any amount of alcohol consumed is damaging to human organs. | ☐ | ☐ |

ANSWERS

1. TRUE. Alcohol is a drug which, after reaching the brain, affects the nervous system.
2. FALSE. Alcohol is immediately absorbed into the bloodstream through the walls of the stomach and small intestine; the blood quickly carries it to the brain, which is why alcohol affects some individuals so soon after consumption.
3. TRUE. Alcohol is oxidized in the liver - 1 hour is needed to burn $\frac{1}{2}$ ounce of alcohol. The unoxidized alcohol remains in the bloodstream and continues to affect the brain and nervous system.
4. FALSE. Despite contrary beliefs, alcohol is a depressant and has a tendency to slow those brain functions which control judgment and thought.
5. FALSE. Moderate alcohol consumption is not usually harmful, but large amounts in the body can lead to irritation, inflammation and possible irreparable damage to the heart, liver, stomach, and other organs.

"Leeches?? Vampires??"

Laboratory technicians have long since given up trying to fight being called "leeches," "vampires," and "blood suckers." In the spirit of the old adage, "If you can't fight 'em, join 'em," we joined 'em for this Halloween! Our main lab phlebotomist, Patty Birmingham, was our "head vampire." Patty is the girl with the flaming red hair and perpetual smile that you see frequently peering out of our patient receiving window. She has been with us nearly a year and has developed quite a finesse with a blood drawing needle. Patty was in charge of this year's Halloween decorations and did an excellent job.

A phlebotomist has to develop a special technique and use plenty of charm and TLC to allay the fears of pediatric patients while drawing blood, and Patty excels at this! If you think the kids are the only ones who "fear" having blood drawn, you ought to see our "older" kids! Anyway, Patty takes good care of them, too. She does her very best to make the experience as atraumatic as possible.

In summary, know that your patients will be in good hands when you send them to the lab with a fist full of test request chits. The "vampires" are alive and well and anxious for more blood!!!



Patty and friend



NURSING SERVICES

Column Coordinator:

LT Joyce E. Drescher, NC, USN



CHAPLAIN'S COMMENTS

LT Janell Nickols, CHC, USN

Soap Opera Nurses

The image portrayed by the media (TV, movies, magazines and novels) is usually an inaccurate version of the educational background, personalities and medical skills of the nursing profession.

The most amusing examples are in the TV programs that falsely stereotype the nurses' lifestyle, both personally and professionally. "I Want to be a Soap Opera Nurse" by Virginia Dewees, RN, is an example of the public's idealistic views towards the always exciting, rewarding, high salaried, slow paced profession we seldom recognize as nursing. "Some nurses launch careers in intensive care or surgery, but the job par excellence is Soap Opera Nurse. Soap Opera Nurses never mess around fixing injections, pouring laxatives, or counting narcotics. They just stand there with a mini-tray of medications and look efficient. They have perfectly fitted uniforms for their size five figures, caps that never tilt, and stockings that never run. Soap Opera Nurses invariably date, marry, and divorce doctors, which gives them a headstart in deciphering medical handwriting. Soap Opera Nurses can always be found in the nurses station puttering around with reports and telephone messages -- seldom in patients' rooms puttering with snarled IV tubing or with clogged suction. Soap Opera Nurses are usually just arriving, just leaving or about to take a coffee or lunch break. They rarely write on charts because they are so busy handing them to other people. When a Soap Opera Nurse wants an elevator, it is always there as are the doctors who lurk near telephones, coffee machines, water coolers, or in wood-paneled offices 3 steps away. Soap Opera Nurses spend minimum time with patients but can reel off enough information about them to make a computer blush. They know all the visitors first names. The only characters who slip by the entire nursing staff unnoticed, are criminal types intent on threatening or killing patients.

A time for thanksgiving

An anonymous poet has written of the Season of Fall and Thanksgiving: "When it is time, we reflect on our work and give thanks -- to our colleagues, friends and the spirit which guides and sustains us. This is the harvest season, the end of a growth cycle. We sift through our experiences to discover and celebrate new wisdom, grieve our losses, and begin preparations for a new year."

The harvest season is a good time for us to reflect upon the many ways that God has provided for us throughout the year. As the farmer gathers the first of his labors and rejoices in the bounty of God's blessings, we also can rejoice as we see the ways that God has touched our lives in our experiences and friendships. Just as the tiny seed has to push its way up through the ground in order to grow, we have had times when we felt as though we were struggling against insurmountable odds. But with God's help, that little seed reaches toward the sky, taking in the gifts of sunlight, air and rain and growing slowly into full maturity. We, too, grow with God's help. We utilize God's gifts of friends and experiences to grow into mature people.

As this Thanksgiving season, may we be truly thankful for the opportunities we have had to grow and mature as God's children and may we look forward to a new year of even more opportunities for growth. Have a glorious Thanksgiving!

Soap Opera Nurses never look tired. Their makeup is like the cover of Glamour. After work, they whip up a little dinner for six or go out on the town with the Chief of Staff. I wish I'd known about Soap Opera Nursing years ago. It's too late now to go back. Besides, state boards are traumatic enough. Competing for an Emmy would certainly do me in! Sounds like fun, huh? I've made my own observation about Soap Opera Nurses -- none of them are men!"

CAREER COUNSELOR'S CORNER



HMC Patricia M. Johnson, USN

The Front Line

By HM1 Patrick Ferguson, USN

"C" Schools

Your decision to attend "C" School may be one of the biggest you'll make in your Naval career; therefore, it is one that you should not take lightly. Even though advanced training may not be in your immediate future, there may come a time when you will want to specialize.

Presently there are better than 40 HM and DT schools available. Each school is listed on NavEdTra 10500 (CANTRAC) and includes location, length, purpose, scope and prerequisites of the course and, in some cases, class convening dates. Some things that should be taken into consideration prior to requesting advanced training are:

1. Job satisfaction. It's recommended that you speak with a technician; visit the department; maybe even volunteer a couple of hours to become familiar with all aspects of the job.
2. Military obligation. Depending on the length of the course, you will be required to have sufficient time remaining on active duty from the class convening date.
3. Sea/Shore Rotation. It is recommended that you inquire as to what types of duty are available upon completing the school.
4. Selective Reenlistment Bonus. Some specialties are entitled to a monetary bonus upon reenlistment. Due to frequent changes, this program should be monitored closely.
5. Paygrade information. Some specialties are limited by paygrade, i.e., Operating Room Tech becomes a general duty corpsman upon advancement to E6; whereas, an Optician Tech may work in that position until selected for E9.
6. Advancement opportunities would certainly be worth asking about.

All applicants for "C" School are screened by a selection board. The board meets monthly for all schools except cardiopulmonary, clinical nuclear medicine, transplant, physical therapy, bio-medical

REU

The Recruit Evaluation Unit, as the title suggests, is solely involved with recruit evaluations. This may sound like a simple task but, in fact, it involves many types of evaluation procedures that begin with a recruit company's second day of processing.

On any given day, REU will process 80 to 160 recruits who are on their P-2 day. The processing involves a briefing on the unacceptable type of behaviors and filling out of a personal profile questionnaire. Besides the initial evaluation, the recruit may be evaluated for a variety of reasons at various times during the training program.

Since REU is directly involved with recruit retention, their findings are highly valued by the Recruit Training Command and it is for this reason that they are required to provide reports not only to the Naval Hospital but also to RTC. Because of the space needed to process so many recruits at one time, REU is physically located in Building 235 on the Recruit Training compound.

The staff is headed by LT Robert Younger, MSC, USN. Members of his staff are: HM2 Richard Krug, HM3 Ronald Hudson, and Mrs. Shirley Briden. Because of their unique expertise, REU is frequently utilized as a psychiatric crisis intervention unit by various command Division Officers.

repair, medical photography and inhalation therapy technician. Boards for these schools meet quarterly.

Under the provision of the Guard III Program, HM and DT "C" Schools are not offered as reenlistment incentives.

Consider everything before making that "big" step!



Master Shipwreck

HMCM(SS) R. C. Clements, USN

New evaluations

The latest edition of Link has an article on the new evaluation system that I would like to share with you. We all know the new system went into effect on 31 August and that the cognizant instruction is NAVMILPERSCOMINST 1616.1A.

"The redesigned, single page form places all enlisted personnel under a single grading system, using the Navy's 'traditional' 4.0 scale. More senior petty officers will be evaluated on their management abilities. Evaluation comments are limited to the space provided on the form. Reporting seniors should list specific accomplishments in a 'bullet' format, instead of writing a discourse. All an exceptionally lengthy commentary does is require a selection board or record user to sift through pages of verbiage before finding any substance."

Other changes include:

Modifying annual reporting dates for E-5 and E-9. E5 evals will be submitted in March. E9 will be submitted in 1983 at the normal time but in 1984 will be submitted in April.

Evaluating "frocked" personnel in their frocked paygrade but only with other "frockees."

Incorporating a specific advancement recommendation block.

Requiring specific justification remarks for an overall 4.0 mark.

Addition of a block for concurrent reports to document an individual's performance while TAD at another command.

The revised form has been issued in two different styles - a single sheet for E4 and below and an OCR set for E5 and above.

Another big change is that percent of body fat is required in lieu of the height and weight. This must be obtained from the Physical Therapy Department and they have specifically set aside Tuesday afternoons for this. Plan ahead when you know you are being evaluated and get there on Tuesday afternoon!!!

Command Master Chief Feature

Meet another of our Enlisted Advisors



HM1 Oscar Gonong, Division LPO of Recruit Sick Call, is the Senior Enlisted Advisor for 14 junior enlisted personnel.

The following personnel are assigned to HM1 Gonong: HM3 F. Bolanos, HM3 K. Kroncke, HN J. Laboy, HM3 C. Lawhorn, HN S. Scott, HM3 J. Tweddle, HN I. Smith, HM3 J. Ullrich, HM3 J. Harvey, HN T. Yates, HA J. Calliher, HN K. Hicks, HM3 Brian Conner, and HA R. William.

EMT Graduates

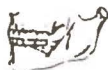


On 28 October, our newest group of EMT graduates received their certificates. Left to right, kneeling in front: HN William Furay, HM3 John Wilkes, HM3 Gregory Brown, HN Murrell Lawhorn, and HN Richard Johnsen, Honorman, 2nd row: LT Claire Pagliara, NC, HM3 Gail Barton, HM3 Diane Holzschuh, HM3 Maureen Helms and HN Everett Bailey. 3rd row with CAPT Herr and CAPT McClurkan: HM3 Cynthia Lawhorn, HN Keith Newton, HM3 Karl Kelly, HM3 Steven Jordan, HM3 Jonathan Allen, HN Lisa Olson, and CW03 Jerry Vance, Instructor.

Just

A

Word from the
Skipper



CAPT A. Herr, DC, USN

Pride is our hallmark

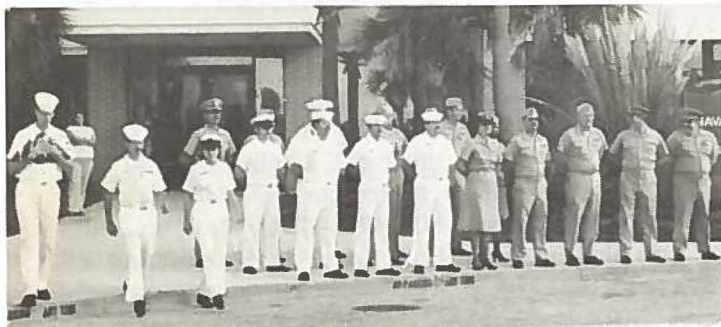
There will be a personnel inspection coming up on Thursday, the 17th of November. The uniform will be Service Dress Blue. Let's look extra sharp: haircuts, shoes, proper belt buckle (for official formations, must be plain with no device).

Pride in ourselves is directly reflected in our military appearance and pride in our job is directly reflected in the way we treat and handle our patients, as well as the cleanliness of our spaces. The hospital is our job. Genuine concern for our shipmates is our job. Every aspect of everything that occurs or evolves in the command is the responsibility of each and everyone of us and we must be involved in every way with the command. Naval Hospital, Orlando -- our job!

Hope each and every member of the staff has the chance to make like a "turkey" on Thanksgiving Day. Stuff yourselves with food, enjoy the company of family and friends, and be especially thankful to be an American!

Morning Colors

Are YOU in this picture?



If not, WHY NOT???



CRA

NOTES



By Dianna Bates

CRA BIRTHDAY GREETINGS TO: Patricia Keefer and Floyd Keller on 2 Nov; Dorothy Welch on 3 Nov; Eloise Unsworth on 7 Nov; Joyce Lockwood on 11 Nov; Patricia Callan and James Wester on 14 Nov; Thomas Van Ells on 17 Nov; Margaret Wilsten on 19 Nov; Elizabeth Spears on 21 Nov; Alice Crownfield on 22 Nov; Arthur Baley on 25 Nov; John Julian on 26 Nov; Douglas Simmons on 27 Nov; Margaret Walker on 28 Nov; and Barbara Fockler on 29 Nov.

Retirement



On 27 October, Margaret Castrianni, RN, retired after 22 years of Federal Service. CAPT Herr and CAPT Nickerson presented her with a Letter of Appreciation and her retirement certificate.

WHOOOIZZIT

It's RP2 Rogenna W. Bean, USN, of the Chaplain's office. Petty Officer



Bean came to the Naval Hospital, Orlando, in July 1982, from the Naval Intelligence Agency in Washington, DC. While she was with them, she made the change in rating from YN to RP. Petty Officer Bean hails from Colorado and is "dreaming" of a future duty assignment to Greece or maybe even Australia!!